



FENWICK & WEST LLP

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FACSIMILE TRANSMISSION

CONFIDENTIAL

DATE: 12/23/04

ATTORNEY DOCKET NO: 23540-7445 US

To:

NAME	FAX NO.	PHONE NO.
USPTO BAU 1631 / Examining Ly	703-872-9306	

FROM: Susan T. Hubl, Ph.D.
Patent Agent

PHONE: (415) 875-2316

NUMBER OF PAGES WITH COVER PAGE: 14	ORIGINAL WILL NOT FOLLOW
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MESSAGE:

US Patent Application No. 09/955,663
Response After Final

CAUTION - CONFIDENTIAL

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TRANSMITTAL FORM (to be used for all correspondence during pendency of filed application)	U.S. Department of Commerce Patent and Trademark Office	Application Number	09/455,663
		Filing Date	09/19/2001
		First Named Inventor	ROCKE
		Group Art Unit Number	1631
		Examiner Name	Chyne D. Ly
Total Number of Pages in This Submission:	14	Attorney Docket Number	23540-7445US (2001-072-2)

ENCLOSURES (check all that apply)	
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed <input checked="" type="checkbox"/> FAX cover sheet <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Cited References <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input checked="" type="checkbox"/> Amendment/Response: [] 0 Page(s) <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Status Request <input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Letter to Chief Draftsperson <input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) [] <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
REMARKS:	

SIGNATURE OF ATTORNEY OR AGENT		
Signature:	<i>Susan T. Hubl</i>	
Attorney/Reg. No.:	Susan T. Hubl, Ph.D., Patent Agent/ USPTO Reg No. 47,668	Dated: 12/23/04

CERTIFICATE OF FACSIMILE TRANSMISSION		
I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below.		
Signature:	<i>Susan T. Hubl</i>	
Typed or Printed Name:	Susan T. Hubl	Dated: 12/23/04
Facsimile Number:	703-872-9306	

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)60.00

Complete If Known

Application Number	09/955,663
Filing Date	09/19/2001
First Named Inventor	ROCKE
Examiner Name	LY
Art Unit	1631
Attorney Docket No.	23540-7445 US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None
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Deposit Account Number 19-2555Deposit Account Name Fenwick & West LLP

The Commissioner is authorized to: (check all that apply)

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☒ Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity/Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath or declaration	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	820*	1804	820*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	120	2251	60	Extension for reply within first month	60
1252	450	2252	225	Extension for reply within second month	
1253	1020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1000	2403	500	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	500	2452	250	Petition to revive - unavoidable	
1453	1,500	2453	750	Petition to revive - unintentional	
1501	1,400	2501	700	Utility issue fee (or reissue)	
1502	800	2502	400	Design issue fee	
1503	1100	2503	550	Plant issue fee	
1460		1460		Petitions to the Director	
1807	50	1807	50	Processing fee for Provisional Applications	
1808	180	1808	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR 1.128(b))	
1801	790	2801	395	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

SUBTOTAL (1)

(\$)0

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	20**	X	
Multiple Dependent	3**	X	

Large Entity/Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1202	50	2202	25	Claims in excess of 20	
1201	200	2201	100	Independent claims in excess of 3	
1203	360	2203	180	Multiple dependent claim, if not paid	
1204	200	2204	100	** Reissue independent claims over original patent	
1205	50	2205	25	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)

(\$)0

*or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	820*	1804	820*
1805	1,840*	1805	1,840*
1251	120	2251	60
1252	450	2252	225
1253	1020	2253	510
1254	1,590	2254	795
1255	2,160	2255	1,080
1401	500	2401	250
1402	500	2402	250
1403	1000	2403	500
1451	1,510	1451	1,510
1452	500	2452	250
1453	1,500	2453	750
1501	1,400	2501	700
1502	800	2502	400
1503	1100	2503	550
1460		1460	
1807	50	1807	50
1808	180	1808	180
8021	40	8021	40
1809	790	2809	395
1810	790	2810	395
1801	790	2801	395
1802	900	1802	900

Other fee (specify) _____

SUBTOTAL (3) (\$)60.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Name (Print/Type)	SUSAN T. HUBB	Registration No. (Attorney/Agent)	47,668	Telephone	415 375 2316
Signature	Susan T. Hubb		Date	12/23/04	

Complete (if applicable)

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)60.00

Complete if Known

Application Number 09/955,663
 Filing Date 09/19/2001
 First Named Inventor ROCKE
 Examiner Name LY
 Art Unit 1631
 Attorney Docket No. 23540-7445 US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None
☒ Deposit Account:

Deposit Account Number 19-2555Deposit Account Name Fenwick & West LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code		
1051	1051	130	65
1052	1052	50	25
1053	1053	130	130
1812	1812	2,520	2,520
1804	1804	920*	920*
1805	1805	1,840*	1,840*
1251	1251	120	60
1252	1252	450	225
1253	1253	1020	510
1254	1254	1,580	795
1255	1255	2,180	1,080
1401	1401	500	250
1402	1402	500	250
1403	1403	1000	500
1451	1451	1,510	1,510
1452	1452	500	250
1453	1453	1,600	750
1601	1601	1,400	700
1502	1502	800	400
1503	1503	1100	550
1460	1460		
1807	1807	50	50
1808	1808	180	180
8021	8021	40	40
1809	1809	790	395
1810	1810	790	395
1801	1801	790	395
1802	1802	900	900

SUBTOTAL (1) (\$)60.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
1	20		
Independent Claims	3		
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	
1202	2202	50 25 Claims in excess of 20
1201	2201	200 100 Independent claims in excess of 3.
1203	2203	360 180 Multiple dependent claim, if not paid
1204	2204	200 100 **Reissue independent claims over original patent
1205	2205	50 25 **Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)0.00

*or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code		
1051	1051	130	65
1052	1052	50	25
1053	1053	130	130
1812	1812	2,520	2,520
1804	1804	920*	920*
1805	1805	1,840*	1,840*
1251	1251	120	60
1252	1252	450	225
1253	1253	1020	510
1254	1254	1,580	795
1255	1255	2,180	1,080
1401	1401	500	250
1402	1402	500	250
1403	1403	1000	500
1451	1451	1,510	1,510
1452	1452	500	250
1453	1453	1,600	750
1601	1601	1,400	700
1502	1502	800	400
1503	1503	1100	550
1460	1460		
1807	1807	50	50
1808	1808	180	180
8021	8021	40	40
1809	1809	790	395
1810	1810	790	395
1801	1801	790	395
1802	1802	900	900

Other fee (specify) _____

SUBTOTAL (3) (\$)60.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Name (Print/Type) SUSANT. HUBLRegistration No. 47,668
(Attorney/Agent)

Complete (if applicable)

Telephone 415 875 2316Signature [Signature]Date 12/23/04

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

DEC 23 2004

APPLICANT(S):	David M. Roche
APPLICATION NO.:	09/955,663
FILING DATE:	September 19, 2001
TITLE:	Method for Determining Measurement Error for Nucleic Acid Microarrays
EXAMINER:	Cheyne D. Ly
GROUP ART UNIT:	1631
ATTY. DKT. NO.:	23540-07445US (UC Ref 2001-072-2)
CERTIFICATE OF TRANSMISSION I hereby certify that this correspondence is being transmitted on the date shown below via facsimile to the attention of: Examiner Cheyne D. Ly at facsimile number 703-872-9306. 12/23/04 Date Susan T. Hubl, Ph.D., Reg. No.: 47,668	

COMMISSIONER FOR PATENTS

P.O. BOX 1450

ALEXANDRIA, VA 22313-1450

SUPPLEMENTAL RESPONSE AFTER FINAL

SIR:

A Final Office Action for the above referenced case was mailed on 09/09/04. Applicant filed a Response on 11/09/04. During a telephone conference with Examiner Ly on November 22, 2004, the Examiner noted that the Response filed 11/09/04 could not be considered due to various informalities, and indicated that he would consider a Supplemental Response that had the various informalities corrected. Accordingly, Applicant submits this Supplemental Response after Final, and requests that this Supplemental Response **REPLACE** the Response filed 11/09/04.

Applicant respectfully requests reconsideration of the claims in the above-identified application in view of the following amendments and remarks for the purpose of putting the application in condition for allowance or, alternatively, to narrow the issues for appeal.

23540/07445/DOCS/1492085.1

Attorney Docket No: 23540-07445/US

Client Ref: 2001-072-2

USSN: 09/955,663

**Amendments to the Specification begin on page 2. Amendments to the Claims
begin on page 3. Remarks begin on page 6.**